| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | S A | 68966 | S-5-62 |

## INDEX OF CLAIMS

| | | |
|---|---|---|
| ✔ | .............................. Rejected | N .................................. Non-elected |
| = | .............................. Allowed | I .................................. Interference |
| – | (Through numeral)... Canceled | A .................................. Appeal |
| ÷ | .............................. Restricted | O .................................. Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)